

# Polish National Union of America

## Authorization Agreement for Automatic Payments

- Addition: New Participant
- Change: Change in Bank and/or account number
- Delete: Cancel Participation Date \_\_\_\_\_ Participant's Initials \_\_\_\_\_

Name \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank's Routing and Transit # \_\_\_\_\_

Account # \_\_\_\_\_ Account Type: Checking \_\_\_\_\_ Savings \_\_\_\_\_

Frequency / Date of Payments: \_\_\_\_\_

Amount of transaction or method by which amount will be determined: \_\_\_\_\_

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I hereby authorize Polish National Union of America, hereinafter called COMPANY, to initiate debit entries to my account at the Bank named above; and to initiate adjustments for any debit entries made in error to my account at the Bank named above, hereinafter called DEPOSITORY I acknowledge the origination of ACH transactions to my account indicated above must comply with the provisions of U.S. Law. This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

If the payment referenced above is returned unpaid by the receivers bank, a \$\_\_\_\_\_ fee will be collected by means of an electronic fund transfer from the consumer's account specified in this authorization.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*\*\*Insert instructions on manner in which the client can revoke the authorization. Include the Company's telephone number to use if they should have inquiries during normal business hours.**